

VERIFICATION OF OVERSEAS EMPLOYMENT FOR NONCOMPETITIVE APPOINTMENT UNDER EO 12362

For use of this form, see AR 690-300; the proponent agency is DCSPER.

1. NAME (*Last, first, MI*)

2. SOCIAL SECURITY NUMBER

3. FEDERAL EMPLOYMENT IN THE OVERSEAS AREA SINCE 1 JANUARY 1980.

NAME AND LOCATION OF INSTALLATION	TYPE OF APPT(S) AND LEGAL AUTH	POSITION(S) TITLE, SERIES & GRADE	FROM			THRU			BONA FIDE FAMILY MEMBER		TOTAL EO CREDITABLE SERVICE		
			MO	DA	YR	MO	DA	YR	YES	NO	YR	MO	DA

4. EMPLOYEE RECEIVED PERFORMANCE APPRAISALS OF FULLY SUCCESSFUL OR HIGHER FOR ALL PERIODS OF SERVICE LISTED ABOVE AFTER 1 JANUARY 1984.
YES ____ NO ____ IF NOT, LIST SPECIFIC PERIOD OF LESS THAN FULLY SUCCESSFUL SERVICE IN ITEM 6.

5. DID EMPLOYEE TAKE NONCOMPETITIVE OR COMPETITIVE EXAM?

YES ____ NO ____
(If yes, state title and date)

6. REMARKS:

7. TYPED NAME & TITLE OF AUTHORIZED CPO OFFICIAL

8. SIGNATURE OF AUTHORIZED CPO OFFICIAL

9. DATE